



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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BIBDATASHEET

Bib Data Sheet

Best Available Copy

CONFIRMATION NO. 9782

SERIAL NUMBER 09/759,287	FILING DATE 01/11/2001 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. UNL 2999.01
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APPLICANTS

Raul G. Barletta, Lincoln, NE;

N. Beth Harris, Lincoln, NE;

**** CONTINUING DATA *******

THIS APPLN CLAIMS BENEFIT OF 60/175,433 01/11/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENT **
** 03/09/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NE	SETS D/WING	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS
000321
SENNIGER POWERS LEAVITT AND ROEDEL
ONE METROPOLITAN SQUARE
16TH FLOOR
ST LOUIS , MO
63102

TITLE

Identification of virulence determinants

FILING FEE

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

RECEIVED

All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)



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**** 03/09/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	NE	2	53	6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

000321

TITLE

Identification of virulence determinants

FILING FEE RECEIVED 772	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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